Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Barbara First name		First name
	license or passport).	Middle name	_	Middle name
	Bring your picture identification to your meeting with the trustee.	Chivers Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	,		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9221		

Debtor 1 Barbara Chivers Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	28095 Hollywood	If Debtor 2 lives at a different address:
		Roseville, MI 48066 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Macomb	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

11.	Do you rent your residence?	■ No.	Go to	line 12.					
			District Debtor District		When When	Case number, if known Relationship to you Case number, if known			
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No	Debtor			Relationship to you			
10	And any bouler water		District District		When When	Case number Case number			
9.	Have you filed for bankruptcy within the last 8 years?	■ No. □ Yes.	District		When	Case number			
		□ III bu	he Filing Fe request that ut is not recoplies to yo	ee in Installments of the thick that my fee be waive your family size and	(Official Form 103A). red (You may request this option our fee, and may do so only if yo you are unable to pay the fee in	on, sign and attach the Application for Individual nonly if you are filing for Chapter 7. By law, a juur income is less than 150% of the official poven installments). If you choose this option, you mistall Form 103B) and file it with your petition.	udge may, erty line that		
8.	How you will pay the fee	— al oı a	oout how your der. If your pre-printed	he entire fee when I file my petition. Please check with the clerk's office in your local court for me you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, our attorney is submitting your payment on your behalf, your attorney may pay with a credit card or ded address. The pay the fee in installments. If you choose this option, sign and attach the Application for Individual					
		☐ Cha	pter 13						
		■ Chapter 7 □ Chapter 11 □ Chapter 12							
	Bankruptcy Code you are choosing to file under	<u>.</u>	,,	, go to the top of p	age 1 and check the appropriat	e box.			
7.	The chapter of the	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							

Case number (if known)

Debtor 1 Barbara Chivers

Jeb	Barbara Chivers				Case number (if known)
ar	Report About Any Bu	ısinesses	You Own	as a Sole Proprie	tor
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code
	it to this petition.		Checi	k the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you ir	dicate that you are ow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of rederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
ar	4: Report if You Own or	· Have An	v Hazardo	ous Property or An	y Property That Needs Immediate Attention
	Do you own or have any	■ No.	,	.,.,,	
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
	•				Number, Street, City, State & Zip Code

Debtor 1 Barbara Chivers

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

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I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Barbara Chivers			Case numb	er (if known)			
Par	t 6: Answer These Questi	ions for Re	eporting Purposes					
16.	What kind of debts do you have?	16a.		nsumer debts? Consumer debts are definal, family, or household purpose."	rined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		siness debts? Business debts are debts tment or through the operation of the bus				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you ow	ve that are not consumer debts or busine	ss debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	perty is excluded and administrative expenses ?					
	administrative expenses are paid that funds will		No					
	be available for		□Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	2 5,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	<u> </u>			
		100-19		☐ 10,001-25,000	☐ More than100,000			
		200-99	99					
19.	How much do you estimate your assets to	\$0 - \$		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	be worth?		01 - \$100,000 001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$ 1	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities		01 - \$100,000	□ \$10,000,001 - \$10 million	□ \$1,000,000,001 - \$1 billion			
	to be?	\$100,0	001 - \$500,000	☐ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion			
		□ \$500,0	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	7: Sign Below							
For	you	I have ex	amined this petition, and I decla	are under penalty of perjury that the infor	mation provided is true and correct.			
				I am aware that I may proceed, if eligible ief available under each chapter, and I c	e, under Chapter 7, 11,12, or 13 of title 11, hoose to proceed under Chapter 7.			
				ot pay or agree to pay someone who is no notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this			
		I request	relief in accordance with the ch	apter of title 11, United States Code, spe	ecified in this petition.			
		bankrupto and 3571	cy case can result in fines up to		or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Barbara	ara Chivers Chivers of Debtor 1	Signature of Debto	or 2			
		Executed	I on June 13, 2019	Executed on				
		2 2 3 3 3	MM / DD / YYYY		M / DD / YYYY			

Debtor 1	Barbara Chivers	Case number (if known)
_		

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Josephine R. Sbrocca Signature of Attorney for Debtor	Date	June 13, 2019 MM / DD / YYYY
Josephine R. Sbrocca		, 22,
Printed name		
Josephine R. Sbrocca (P45546)		
29204 Hoover Road Warren, MI 48093		
Number, Street, City, State & ZIP Code		
Contact phone (586) 751-4421	Email address	jrsbrocca@gmail.com
P45546 MI		
Bar number & State		

		ation to identify your	case:				
Dec	otor 1	Barbara Chivers First Name	Middle Name	Last Name			
	otor 2 use if, filing)	First Name	Middle Name	Last Name			
` `	-	cruptcy Court for the:	EASTERN DISTRICT				
		dupley Court for the.	ENOTERIN BIOTRIOT				
	se number				_	Check if thi amended fi	
		m 106Sum					
				and Certain Statistical Information		12/15	
info	rmation. Fill ou r original form	it all of your schedul	es first; then complete	ole are filing together, both are equally responsile the information on this form. If you are filing an eck the box at the top of this page.			
					-	our assets /alue of wha	•
1.		B: Property (Official Foundation 55, Total real estate, for				\$	101,000.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/	В		\$	47,460.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B		(\$	148,460.00
Par	t 2: Summa	rize Your Liabilities					
						our liabilit i Amount you	
2.			laims Secured by Prope mn A, Amount of claim,	erty (Official Form 106D) at the bottom of the last page of Part 1 of Schedule	D	\$	82,800.00
3.			Unsecured Claims (Office 1 (priority unsecured class)	cial Form 106E/F) aims) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured	d claims) from line 6j of Schedule E/F	!	\$	21,518.83
				Your total liabil	ities \$_	1	04,318.83
Par	t 3: Summa	rize Your Income and	Expenses				
4.		our Income (Official Fo		ule I		\$	2,559.86
5.		our Expenses (Official onthly expenses from li			(\$	2,538.90
Par	t 4: Answer	These Questions for	Administrative and St	atistical Records			
6.	•		er Chapters 7, 11, or 13 on this part of the form.	3? Check this box and submit this form to the court wi	th your oth	ner schedul	es.
7.	YesWhat kind of	debt do you have?					
	■ Your de	bts are primarily con	sumer debts. Consume	er debts are those "incurred by an individual primaril	y for a per	rsonal, fami	ly, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,667.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	or 1	Barbara Chivers				
			Middle Name Last Name			
	or 2 se, if filing) Fi	irst Name	Middle Name Last Name			
Jnit	ed States Bankru	otcy Court for the: EASTE	ERN DISTRICT OF MICHIGAN			
cas:	number					☐ Check if this is a
						amended filing
	<u>icial Form</u>					
C	hedule A	4/B: Property	1			12/15
Part Do			or Other Real Estate You Own or Have an Int			
	☐ No. Go to Pai	rt 2.				
	= × × × × · · ·					
	Yes. Where i	s the property?				
.1	28095 Hollywo		What is the property? Check all that apply a Single-family home Duplex or multi-unit building Condominium or cooperative	Do the	e amount of any secured	ims or exemptions. Put d claims on Schedule D: ns Secured by Property.
.1	28095 Hollywo	ood	Single-family home Duplex or multi-unit building	Do the <i>Cr</i>	e amount of any secured reditors Who Have Clain	d claims on Schedule D: ns Secured by Property.
.1	28095 Hollywo Street address, if avail	ood lable, or other description MI 48066-000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do the Cr	e amount of any secured editors Who Have Clain urrent value of the tire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
.1	28095 Hollywo Street address, if avail	DOd lable, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do the Cr	e amount of any secured editors Who Have Clain arrent value of the tire property? \$101,000.00	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$101,000.0
.1	28095 Hollywo Street address, if avail	ood lable, or other description MI 48066-000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do the Cri	e amount of any secured editors Who Have Clain urrent value of the tire property? \$101,000.00 escribe the nature of years as fee simple, tens	Current value of the portion you own? \$101,000.00 Substitute of the portion you own?
.1	28095 Hollywo Street address, if avail	ood lable, or other description MI 48066-000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property	Cu en De (ss	er amount of any secured editors Who Have Clain arrent value of the tire property? \$101,000.00 escribe the nature of years.	current value of the portion you own? \$101,000.00 Schedule D: Property.
.1	28095 Hollywo Street address, if avail Roseville City	ood lable, or other description MI 48066-000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property' Debtor 1 only	Cu en De (ss	e amount of any secured editors Who Have Clain urrent value of the tire property? \$101,000.00 escribe the nature of years as fee simple, tens	current value of the portion you own? \$101,000.00 Schedule D: Property.
.1	28095 Hollywo Street address, if avail	ood lable, or other description MI 48066-000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property	Cu en De (ss	e amount of any secured editors Who Have Clain arrent value of the tire property? \$101,000.00 escribe the nature of youch as fee simple, tensife estate), if known.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$101,000.00 our ownership interest ancy by the entireties, o
.1	28095 Hollywood Street address, if avail Roseville City Macomb	ood lable, or other description MI 48066-000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property' Debtor 1 only Debtor 2 only	Cuen Cra Cuen De (su	e amount of any secured editors Who Have Clain urrent value of the tire property? \$101,000.00 escribe the nature of years as fee simple, tens	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$101,000.00 our ownership interest ancy by the entireties, o
.1	28095 Hollywood Street address, if avail Roseville City Macomb	ood lable, or other description MI 48066-000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property' Debtor 1 only Debtor 2 only Debtor 2 only	Cuen Check one another	e amount of any secured editors Who Have Claim urrent value of the tire property? \$101,000.00 escribe the nature of yearch as fee simple, tensife estate), if known. Check if this is com (see instructions)	Current value of the portion you own? \$101,000.0 Our ownership interest ancy by the entireties, of
1.1	28095 Hollywood Street address, if avail Roseville City Macomb	ood lable, or other description MI 48066-000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property' Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Other information you wish to add a	Cuen Check one another	e amount of any secured editors Who Have Claim urrent value of the tire property? \$101,000.00 escribe the nature of yearch as fee simple, tensife estate), if known. Check if this is com (see instructions)	Current value of the portion you own? \$101,000.0 Our ownership interest ancy by the entireties, c

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

ebtor 1 _E	Barbara Chivers		Case number (if known)	
Cars, vans	, trucks, tractors, sport utility	vehicles, motorcycles		
□No	•	•		
_				
Yes				
1 Makai	Jeep	Who has an interest in the preparty? Obselves	Do not deduct secured of	laims or exemptions. Put
.1 Make: Model:	Liberty	Who has an interest in the property? Check one Debtor 1 only		ed claims on Schedule D: ims Secured by Property.
Year:	2011	Debtor 2 only		
	mate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	formation:	At least one of the debtors and another		
	ner for daughter, who			
	and pays for vehicle	Check if this is community property (see instructions)	\$6,800.00	\$6,800.00
2 Make:	Town & Country	Who has an interest in the property? Check one		laims or exemptions. Put
Model:	Chrysler	· _		ed claims on Schedule D: ims Secured by Property.
Year:	2005	■ Debtor 1 only □ Debtor 2 only		
	mate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	formation:	☐ At least one of the debtors and another		, ,
			4	•
		☐ Check if this is community property	\$2,500.00	\$2,500.00
		(see instructions)		
		own for all of your entries from Part 2, including that number here		\$9,300.00
rt 3: Descr	ibe Your Personal and Household	Items		
you own	or have any legal or equitable	interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	goods and furnishings Major appliances, furniture, liner	ns, china, kitchenware		
	Household Go	oods and Furnishings		\$5,000.00
			·	
Electronics Examples:				
_	including cell phones, cameras,	ideo, stereo, and digital equipment; computers, prin media players, games	iters, scanners; music collect	ons; electronic devices
— 163. De			iters, scanners; music collect	ons; electronic devices
	escribe	media players, games	nters, scanners; music collect	·
	escribe		nters, scanners; music collect	ons; electronic devices
	TV, tablet, cel	I phone, camera, camcorder s, prints, or other artwork; books, pictures, or other		\$250.00

Official Form 106A/B

☐ Yes. Describe.....

Schedule A/B: Property

page 2

0	י וטוטו	arbara Cilivers			(II KIIOWII)	
	Examples:	for sports and hobbies Sports, photographic, exercise, musical instruments	and other hobby equipmer	nt; bicycles, pool tables, golf clubs, skis	s; canoes an	d kayaks; carpentry tools;
	■ No □ Yes. De	scribe				
	Firearms	301100				
	Examples	Pistols, rifles, shotguns, ammu	nition, and related equipm	ent		
	■ No □ Yes. De	scribe				
	Clothes					
		Everyday clothes, furs, leather	coats, designer wear, sho	es, accessories		
	Yes. De	scribe				
		Wearng appar	el]	\$400.00
12.	Jewelry Examples □ No	: Everyday jewelry, costume jew	elry, engagement rings, w	edding rings, heirloom jewelry, watche	s, gems, gol	d, silver
	Yes. De	scribe				
		Wedding ring,	costume jewelry		1	\$1,000.00
13.	Non-farm : Examples ☐ No	animals Dogs, cats, birds, horses				
	Yes. De	scribe				
		Dog			1	\$5.00
		<u> </u>				
		personal and household item	s you did not already lis	t, including any health aids you did r	not list	
	■ No □ Yes Giv	ve specific information				
	— 100. On	e specific information			_	
15				g any entries for pages you have atta	ched	\$6,655.00
	for Part 3	3. Write that number here				Ψ0,033.00
Pa	rt 4: Descri	be Your Financial Assets				
		r have any legal or equitable	interest in any of the foll	owing?		Current value of the
						portion you own? Do not deduct secured claims or exemptions.
16.	Cash					
	Examples ■ No	: Money you have in your wallet	, in your home, in a safe d	eposit box, and on hand when you file	your petition	
	☐ Yes					
17.	Deposits of Examples	: Checking, savings, or other fin		es of deposit; shares in credit unions, b	rokerage ho	uses, and other similar
	□ No	institutions. If you have multiple	e accounts with the same	institution, list each.		
	Yes		Institutio	n name:		
		17.1. Check	ing Hunting	gton Bank		\$500.00

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1	Barbara Chivers		Case number (if know	wn)
	17.2.	Savings	Christian Financial C/U	\$5.00
Exam	s, mutual funds, or publi ples: Bond funds, investm		okerage firms, money market accounts	
■ No □ Yes.		Institution or issuer	name:	
	ublicly traded stock and venture	d interests in incorp	orated and unincorporated businesses, including an inte	rest in an LLC, partnership, and
	. Give specific information Na	n about them ame of entity:	% of ownership:	
Nego	tiable instruments include	personal checks, cas	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	. Give specific information	about them suer name:		
<i>Exam</i> □ No	,	ISA, Keogh, 401(k), 4	403(b), thrift savings accounts, or other pension or profit-shari	ing plans
■ Yes.	List each account separa. Type	ately. of account:	Institution name:	
	4031	o	Ascension Health Retirement Savings Plan	\$14,000.00
Your		its you have made so	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications com	panies, or others
■ No □ Yes.			Institution name or individual:	
23. Annui	ties (A contract for a perio	odic payment of mone	ey to you, either for life or for a number of years)	
	lssuer nar	me and description.		
	sts in an education IRA, .C. §§ 530(b)(1), 529A(b)		qualified ABLE program, or under a qualified state tuition	program.
☐ Yes.	Institution	name and description	n. Separately file the records of any interests.11 U.S.C. § 521	(c):
25. Trusts ■ No	s, equitable or future into	erests in property (c	other than anything listed in line 1), and rights or powers	exercisable for your benefit
☐ Yes.	. Give specific information	n about them		
			nd other intellectual property eds from royalties and licensing agreements	
☐ Yes.	. Give specific information	about them		
	ses, franchises, and other ples: Building permits, ex		es perative association holdings, liquor licenses, professional lice	enses
	. Give specific information	n about them		
Money or	property owed to you?			Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

De	ebtor 1	Barbara Chivers		Ca	ase number (if known)	
28.	Tax ref	funds owed to you				
		Give specific information about the	em, including whether you alread	dy filed the returns and	I the tax years	
29.	Examp	r support oles: Past due or lump sum alimon	y, spousal support, child suppor	t, maintenance, divorc	e settlement, property	settlement
			Child support arrearage of ex-husband	wed by	Child Support	\$17,000.00
30.	Exam _i ■ No	amounts someone owes you oles: Unpaid wages, disability insurbenefits; unpaid loans you ma		iits, sick pay, vacation	pay, workers' compen	sation, Social Security
31.	Exam _i ■ No	sts in insurance policies bles: Health, disability, or life insura Name the insurance company of e	,	SA); credit, homeowne	er's, or renter's insuran	ce
		Company n		Beneficiary	<u>:</u>	Surrender or refund value:
32.	If you a some of	terest in property that is due you are the beneficiary of a living trust, one has died. Give specific information			urrently entitled to rece	ive property because
33.	Exam _l ■ No	s against third parties, whether o oles: Accidents, employment dispu	•		or payment	
24		Describe each claim contingent and unliquidated clai	ms of overvineture including	countaralaims of the	dobtor and rights to	cat off plaims
34.	■ No	Describe each claim	ms or every nature, including	counterclaims of the	debior and rights to	set on Claims
35.	Any fir	nancial assets you did not alread	y list			
	■ No □ Yes.	Give specific information				
36		the dollar value of all of your ent art 4. Write that number here				\$31,505.00
Pa	art 5: De	scribe Any Business-Related Proper	ty You Own or Have an Interest In	. List any real estate in F	Part 1.	
	_ `	own or have any legal or equitable in	terest in any business-related pro	perty?		
	_	Go to line 38.				
						Current value of the portion you own? Do not deduct secured

claims or exemptions.

38. Accounts receivable or commissions you already earned

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1	Barbara Chiv	vers	Case number (if known)	
□ No □ Ye	s. Describe			
39. Offic	e equipment, furni mples: Business-rel	shings, and supplies ated computers, software, modems, printers, copiers, fax machines,	rugs, telephones, desks, c	hairs, electronic devices
□ No □ Ye	s. Describe			
40. Mac l	ninery, fixtures, eq	uipment, supplies you use in business, and tools of your trade		
□ No □ Ye	s. Describe			
41. Inve	entory			
□ No □ Ye	s. Describe			
42. Inter	ests in partnership	os or joint ventures		
□ No □ Ye		ormation about them Name of entity:	% of ownership:	
□ No.		lists, or other compilations sonally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	☐ No ☐ Yes. Describe			
44. Any	business-related p	roperty you did not already list		
□ No □ Ye	s. Give specific info	rmation		
		of all of your entries from Part 5, including any entries for pages number here	you have attached	
		nd Commercial Fishing-Related Property You Own or Have an Interest Interest in farmland, list it in Part 1.	.	
■ N	lo. Go to Part 7.	y legal or equitable interest in any farm- or commercial fishing-r	related property?	
ΠY	es. Go to line 47.			Current value of the

portion you own?
Do not deduct secured

Official Form 106A/B

Schedule A/B: Property

Debtor 1	Barbara Chi	vers	Case number (if known)	
				claims or exemptions.
47. Farm a Exam		oultry, farm-raised fish		
□ No □ Yes.				
48. Crops	-either growing	g or harvested		
□ No □ Yes.	Give specific info	ormation		
49. Farm a	and fishing equi	pment, implements, machinery, fixtures, and tools of trade		
□ No □ Yes.				
50. Farm a	and fishing supp	olies, chemicals, and feed		
□ No □ Yes.				
51. Any fa	ırm- and comme	rcial fishing-related property you did not already list		
□ No □ Yes.	Give specific info	ormation		
		of all of your entries from Part 6, including any entries for pa		
Part 7:	Describe All Pro	operty You Own or Have an Interest in That You Did Not List Above	L	
		perty of any kind you did not already list? ets, country club membership		
☐ Yes.	Give specific info	ormation		
54. Add	the dollar value	of all of your entries from Part 7. Write that number here		\$0.00
			L	

Deb	tor 1 Barbara Chivers		Case number (if known)	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$101,000.00
56.	Part 2: Total vehicles, line 5	\$9,300.00		
57.	Part 3: Total personal and household items, line 15	\$6,655.00		
58.	Part 4: Total financial assets, line 36	\$31,505.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$47,460.00	Copy personal property total	\$47,460.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$148,460.00

Fill in this infor				
Debtor 1	Barbara Chivers	Middle Name	Last Name	
Debtor 2	FIISTINATILE	wildule Name	Lastivanie	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	PF MICHIGAN	
Case number _				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	laentity the Prope	rty You Claim as Exempt
	-	

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.			
	28095 Hollywood Roseville, MI 48066 Macomb County	\$101,000.00		\$25,000.00	11 U.S.C. § 522(d)(1)		
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit			
	2011 Jeep Liberty Co-signer for daughter, who drives	\$6,800.00		\$1.00	11 U.S.C. § 522(d)(5)		
	and pays for vehicle Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit			
	2005 Town & Country Chrysler Line from Schedule A/B: 3.2	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(2)		
	Line nom Schedule AVD. 3.2			100% of fair market value, up to any applicable statutory limit			
	Household Goods and Furnishings Line from Schedule A/B: 6.1	\$5,000.00		\$5,000.00	11 U.S.C. § 522(d)(3)		
	Line nom Schedule AVD. 0.1			100% of fair market value, up to any applicable statutory limit			
	TV, tablet, cell phone, camera, camcorder	\$250.00		\$250.00	11 U.S.C. § 522(d)(5)		
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit			

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for each exemption.			
	Wearng apparel Line from Schedule A/B: 11.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)	
	Zino nom concadio / v.Z. TTT			100% of fair market value, up to any applicable statutory limit		
	Wedding ring, costume jewelry Line from Schedule A/B: 12.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(4)	
	Zino nom <i>Gonedale / V.</i> Z. 1 2 11			100% of fair market value, up to any applicable statutory limit		
	Dog Line from Schedule A/B: 13.1	\$5.00	•	\$5.00	11 U.S.C. § 522(d)(5)	
	Ellio II ou leada e / V.Z. 1911			100% of fair market value, up to any applicable statutory limit		
	Checking: Huntington Bank Line from Schedule A/B: 17.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)	
	Ellie Holli Gonedale A.B. 1111			100% of fair market value, up to any applicable statutory limit		
	Savings: Christian Financial C/U Line from Schedule A/B: 17.2	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)	
	Zino nom concadio /v.z. 1112			100% of fair market value, up to any applicable statutory limit		
	403b: Ascension Health Retirement Savings Plan	\$14,000.00		\$14,000.00	11 U.S.C. § 522(d)(12)	
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
	Child Support: Child support arrearage owed by ex-husband	\$17,000.00		\$17,000.00	11 U.S.C. § 522(d)(10)(D)	
	Line from Schedule A/B: 29.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3			led on or after the date of adjustme	nt.)	
	■ No	- d b	المائمة	OAE dave hafara van filad this assa	2	
	Yes. Did you acquire the property covered No	ed by the exemption wi	ının 1,	∠ 15 days before you filed this case	· (
	☐ Yes					

Fill in this inform	mation to identify you	ır case:			
Debtor 1	Barbara Chivers	S			
	First Name	Middle Name Last Name		-	
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Ba	inkruptcy Court for the:	EASTERN DISTRICT OF MICHIGAN		_	
Case number					
(if known)				_	if this is an ded filing
				amend	ded ming
Official Forn	n 106D				
Schedule	D: Creditors	Who Have Claims Secured	d by Propert	y	12/15
number (if known).		out, number the entries, and attach it to this form. O y your property?	, , , , , , , , , , , , , , , , , , , ,		
□ No. Checl	k this box and submit tl	his form to the court with your other schedules. Y	ou have nothing else	to report on this form.	
Yes. Fill in	all of the information	below.			
Part 1: List A	II Secured Claims				
2. List all secured	claims. If a creditor has r	more than one secured claim, list the creditor separately	Column A	Column B	Column C
much as possible,	list the claims in alphabeti	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Christian Union	Financial Credit	Describe the property that secures the claim:	\$6,800.00	\$6,800.00	\$0.00
Creditor's Nam	е	2011 Jeep Liberty Co-signer for daughter, who drives and pays for vehicle			
18441 Uti		As of the date you file, the claim is: Check all that apply.			
	, MI 48066	Contingent			
Number, Stree	t, City, State & Zip Code	☐ Unliquidated			
Who owes the de	ebt? Check one	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only	one on one.	■ An agreement you made (such as mortgage or see	ourod		
Debtor 2 only		car loan)	curea		
Debtor 1 and D	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of t	the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this c		Other (including a right to offset)			

Date debt was incurred 9/2016

Last 4 digits of account number

292

Debtor 1 Barbara Chivers		Case number (if known)					
First Name Middle N	lame Last Name						
2.2 Loancare	Describe the property that secures the claim:	\$76,000.00	\$101,000.00	\$0.00			
Creditor's Name	28095 Hollywood Roseville, MI 48066 Macomb County						
PO Box 8968 Virginia Beach, VA 23450	As of the date you file, the claim is: Check all that apply. Contingent						
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed						
Who owes the debt? Check one.	Nature of lien. Check all that apply.						
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	secured					
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)						
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit						
☐ Check if this claim relates to a community debt	Other (including a right to offset)						
Date debt was incurred	Last 4 digits of account number 8216	<u> </u>					
•	Column A on this page. Write that number here:	\$82,800.	00				
If this is the last page of your form, add	the dollar value totals from all pages.	\$82.800.	00				

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in this infor	mation to identify your case:				
Debtor 1	Barbara Chivers				
	First Name Mi	ddle Name Last Nar	ne		
Debtor 2 (Spouse if, filing)	First Name Mi	ddle Name Last Nar	me		
United States Br	ankruptov Court for the: EASTE	RN DISTRICT OF MICHIGAN			
Officed States Ba	ankruptcy Court for the: EASTE	KN DISTRICT OF WILCHIGAN			
Case number (if known)					Life de la casa
(ii kilowii)				_	k if this is an ded filing
Official Form					
	E/F: Creditors Who Ha				12/15
any executory con Schedule G: Execu Schedule D: Credi	nd accurate as possible. Use Part 1 for tracts or unexpired leases that coul- utory Contracts and Unexpired Leas- titors Who Have Claims Secured by Portinuation Page to this page. If you hamber (if known).	d result in a claim. Also list executes (Official Form 106G). Do not incroperty. If more space is needed, o	tory contracts on Schedule A/B: P lude any creditors with partially s copy the Part you need, fill it out, i	Property (Official For secured claims that number the entries	orm 106A/B) and on are listed in in the boxes on the
Part 1: List A	All of Your PRIORITY Unsecured	Claims			
	tors have priority unsecured claims a	gainst you?			
No. Go to I	Part 2.				
☐ Yes.					
listed, iden much as po	your priority unsecured claims. If a ca titify what type of claim it is. If a claim ha ossible, list the claims in alphabetical or art 1. If more than one creditor holds a p	s both priority and nonpriority amounder according to the creditor's name.	ts, list that claim here and show both . If you have more than two priority u	h priority and nonprid	ority amounts. As
(For an exp	planation of each type of claim, see the	instructions for this form in the instru		B .444	N 1
			Total claim	Priority amount	Nonpriority amount
2.4					
2.1.					
Priority C	Creditor's Name	Last 4 digits of account numbe	r	<u> </u>	
T Horky O	reality 3 Name	When was the debt incurred?		_	
Number S	Street City State Zip Code	As of the date you file, the clair	n is: Check all that apply		
	, ,	☐ Contingent	11,		
Who incurre	ed the debt? Check one.	☐ Unliquidated			
Debtor 1	•	☐ Disputed			
Debtor 2					
	and Debtor 2 only	Type of PRIORITY unsecured c	laim·		
_	one of the debtors and another this claim is for a community debt	☐ Domestic support obligations			
	subject to offset?				
	subject to onset?	☐ Taxes and certain other debts	-		
□ No		Claims for death or personal in			
☐ Yes		Other. Specify			_
Part 2: List A	All of Your NONPRIORITY Unsec	ured Claims			
3. Do any credit	tors have nonpriority unsecured clain	ns against you?			
☐ No. You ha	ave nothing to report in this part. Submi	t this form to the court with your other	r schedules.		
Yes.	• 1 - 1 - 1 - 1	· ,···			
unsecured cla	ur nonpriority unsecured claims in the iim, list the creditor separately for each itor holds a particular claim, list the other	claim. For each claim listed, identify v	what type of claim it is. Do not list cla	aims already include	d in Part 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 5

btor 1 Barbara Chivers		Case number (if known)						
Auto Pass/CFNA Nonpriority Creditor's Name	Last 4 digits of account number	6919	\$763.00					
PO Box 81315	When was the debt incurred?	2018						
Cleveland, OH 44181-0315 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply						
Who incurred the debt? Check one.	no or the date you me, the claim.	o. Oncok all that apply						
■ Debtor 1 only	☐ Contingent							
Debtor 2 only	☐ Unliquidated							
Debtor 1 and Debtor 2 only	☐ Disputed							
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
☐ Check if this claim is for a community	☐ Student loans							
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not						
■ No	Debts to pension or profit-sharin	g plans, and other similar debts						
□ Yes	■ Other. Specify Revolving	- ·						
	— Other opening							
Credit Control LLC Nonpriority Creditor's Name	Last 4 digits of account number	8249	\$3,348.00					
5757 Phantom Dr, Ste 330 Hazelwood, MO 63042	When was the debt incurred?	2019						
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
■ Debtor 1 only	☐ Contingent							
Debtor 2 only	☐ Unliquidated							
Debtor 1 and Debtor 2 only	☐ Disputed							
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
☐ Check if this claim is for a community	☐ Student loans							
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
■ No	Debts to pension or profit-sharin	g plans, and other similar debts						
☐ Yes	Collection a Original Cr #1482 Other. Specify Current Cre	editor: Capital One Acct ending						
Discover	Last 4 digits of account number	0447	\$5,039.00					
Nonpriority Creditor's Name PO Box 3008	When was the debt incurred?							
New Albany, OH 43054-3008 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
■ Debtor 1 only	☐ Contingent							
Debtor 2 only	☐ Unliquidated							
Debtor 1 and Debtor 2 only	☐ Disputed							
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
Check if this claim is for a community	☐ Student loans							
debt Is the claim subject to offset?		aration agreement or divorce that you did not						
■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
☐ Yes	■ Other. Specify Revolving							

1 Barbara Chivers	Case number (if known)	
Motor City Co-Op Credit Union Nonpriority Creditor's Name c/o Butler Rowse-Oberle PLLC	Last 4 digits of account number 7945 When was the debt incurred?	\$11,486.00
24525 Harper Ave Saint Clair Shores, MI 48080	when was the dept incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Revolving line of credit	
SJP Laboratory	Last 4 digits of account number 0671	\$141.00
Nonpriority Creditor's Name 8085 Rivers Ave #100	When was the debt incurred? 2018	
Charleston, SC 29406-9239 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	ne or and date year may and order an area appry	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical services	
St. John Anesthesiologists	Last 4 digits of account number 7221	\$17.7
Nonpriority Creditor's Name PO Box 67000 Detp 227601 Detroit, MI 48267	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical services	

Debtor	Barbara Chivers		Case number (if known)					
4.7	St. John Macomb Oakland Hospital Nonpriority Creditor's Name	Last 4 digits of account number	8347	\$100.00				
	11800 E. 12 Mile Rd	When was the debt incurred?	2018					
	Warren, MI 48093 Number Street City State Zip Code	As of the date you file, the claim	is: Cheek all that apply					
	Who incurred the debt? Check one.	As of the date you me, the claim	13. Спеск ан шасарру					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep- report as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	Yes	Other. Specify Medical se	rvices					
4.8	St. John Providence Nonpriority Creditor's Name	Last 4 digits of account number	0159	\$241.97				
	PO Box 42008 Phoenix, AZ 85080-2008	When was the debt incurred?	2018					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeter of a sepa	aration agreement or divorce that you did not					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify Medical se	rvices					
4.9	St; John Hospital & Medical Center	Last 4 digits of account number	0159	\$382.09				
	Nonpriority Creditor's Name PO Box 773179	When was the debt incurred?	2018					
	3179 Solutions Center	This was the asst mountain.	2010					
	Chicago, IL 60677-3001 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	-						
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	□ Obligations arising out of a separate of the properties	aration agreement or divorce that you did not					
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify Medical se	rvices					
Part 3:	List Others to Be Notified About a De	ot That You Already Listed						
	his page only if you have others to be notified a	•	you already listed in Parts 1 or 2. For example	e. if a collection agency				
is tryi have	inis page only if you have officers to be notified a inig to collect from you for a debt you owe to so more than one creditor for any of the debts tha ed for any debts in Parts 1 or 2, do not fill out o	meone else, list the original creditor in t you listed in Parts 1 or 2, list the add	Parts 1 or 2, then list the collection agency	here. Similarly, if you				
Name a		On which entry in Part 1 or Part 2 did you Line 4.9 of (<i>Check one</i>):	list the original creditor? Part 1: Creditors with Priority Unsecured Clain	ns				

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 5

Debtor 1 Barbara Chivers		Case number (if known)
PO Box 21625 Columbia, SC 29221-1625		■ Part 2: Creditors with Nonpriority Unsecured Claims
·	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?
Estate Information Services	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 1398 Reynoldsburg, OH 43068-6398		Part 2: Creditors with Nonpriority Unsecured Claims
Reynoldsburg, Off 43000-0330	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 1	2 did you list the original creditor?
Motor City Co-Op Credit Union	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
28820 Mound Road		■ Part 2: Creditors with Nonpriority Unsecured Claims
Warren, MI 48092	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
T.4.1	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 21,518.83
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 21,518.83

Fill in this infor					
Debtor 1	Barbara Chivers				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN		
Case number _					Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5	2				
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>

FIII IN THIS I	information to identify your	case:			
Debtor 1	Barbara Chivers				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT OF I	MICHIGAN		
Case numb (if known)	er				☐ Check if this is an amended filing
Sched	Form 106H ule H: Your Code		vou mov hovo. Po oo o	nomplete and account	12/15
people are f fill it out, an your name a	filing together, both are equand number the entries in the and case number (if known)	ally responsible for supplyi boxes on the left. Attach th Answer every question.	ing correct information he Additional Page to t	n. If more space is this page. On the to	rate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
	you have any codebtors? (If y	you are filing a joint case, do	not list either spouse as	a codebtor.	
□ No ■ Yes					
Arizona No. 0	ain the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou	Nevada, New Mexico, Puert	to Rico, Texas, Washing		ty states and territories include)
	□ No				
	☐ Yes.				
	In which community state	e or territory did you live?		$_$. Fill in the name a	and current address of that person.
	City	State	Zip Code		
	2 again as a codebtor only it	f that person is a guarantor	r or cosigner. Make su	re you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F or Schedule G to fill
in line : Form 1	106D), Schedule E/F (Official Jumn 2.				concade Er, or concade o to in
in line : Form 1 out Co	,.	P Code		Column 2: The cr Check all schedul	editor to whom you owe the debt

Fill	in this information to	o identify your ca	se:							
Deb	otor 1	Barbara Chiv	vers .			_				
	otor 2 buse, if filing)					_				
Uni	ted States Bankrup	tcy Court for the:	EASTERN DISTRICT	OF MICHIGAN		_				
(If kn	se number							ed filing ent showin	ng postpetition ollowing date:	
<u>O</u>	fficial Form	<u> 1061</u>					MM / DD/ Y	YYY		
S	chedule I: `	Your Inco	ome							12/15
sup _i spo atta	plying correct info use. If you are sep ch a separate shee	rmation. If you a	ible. If two married peo are married and not filin spouse is not filing with On the top of any addition	ig jointly, and your sp th you, do not include	ouse i inforn	s living wit	h you, incl ut your spo	ude inforr ouse. If m	mation about ore space is	your needed,
1.	Fill in your emploinformation.	oyment		Debtor 1			Debtor 2	2 or non-fi	iling spouse	
	If you have more		Employment status	■ Employed			☐ Empl	oyed		
	attach a separate information about	1 - 3 -	Employment status	☐ Not employed			☐ Not employed			
	employers.		Occupation	Patient Care Tech						
	Include part-time, self-employed wo		Employer's name	St John Hospital						
	Occupation may in or homemaker, if		Employer's address							
			How long employed th	nere? 15 years						
Par	t 2: Give Det	tails About Mon	thly Income							
	mate monthly inco		te you file this form. If y	ou have nothing to rep	ort for a	any line, wri	ite \$0 in the	space. In	clude your no	n-filing
	u or your non-filing e space, attach a se		re than one employer, co his form.	mbine the information	for all e	mployers fo	or that perso	on on the li	ines below. If	you need
						For Do	ebtor 1		btor 2 or ing spouse	
2.			y, and commissions (be alculate what the monthly		2.	\$	2,667.60	\$	N/A	
3.	Estimate and list	t monthly overti	me pay.		3.	+\$	325.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	e 2 + line 3.		4.	\$	992.60	\$	N/A	

Debtor 1 Barbara Chivers	Case number (if known)
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					For	Debtor 1		or Debtor on-filing s		
	Сору	line 4 here	4.		\$	2,992.60		<u> </u>	N/A	<u> </u>
5.	List a	all payroll deductions:								_
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	269.04	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$ 	0.00	- '-		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$ 	21.67	-		N/A	_
	5d.	Required repayments of retirement fund loans	5d	l.	\$	0.00	\$		N/A	_
	5e.	Insurance	5e	٠.	\$	142.03	\$		N/A	_ \
	5f.	Domestic support obligations	5f.		\$_	0.00	\$		N/A	_
	5g.	Union dues	5g	l.	\$_	0.00	\$		N/A	_
	5h.	Other deductions. Specify:	5h		\$	0.00	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	,	\$	432.74	\$		N/A	<u> </u>
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	(\$_	2,559.86	\$		N/A	<u>\</u>
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b		\$ -	0.00	- ' -		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$ _	0.00			N/A	_
	8d.	Unemployment compensation	8d		\$_	0.00			N/A	_
	8e.	Social Security	8e		$\overset{\mathtt{v}}{\$}-$	0.00			N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00	-		N/A	_
	8g.	Pension or retirement income	8g		\$_	0.00	. \$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h	.+	\$_	0.00	. + \$.		N/A	<u>\</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	i	0.00	\$		N/	A
10.		ulate monthly income. Add line 7 + line 9. he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,559.86 +		N/A	= \$	2,559.86
	State Include other Do not Specification	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not	depe availa	able	to p	pay expenses lis	sted in	Schedul 11.	e J. +\$	0.00
12.		that amount on the Summary of Schedules and Statistical Summary of Certain							\$	2,559.86
13.	Do yo	ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	?						Combi month	lned ly income

Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1:	Fill in this inforn	nation to identify ye	our case:					
Debtor 2 (Spouse, if Bing) United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN Case number (if known) Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Total Describe Your Household I. Is this a joint case? No Go to line 2. Yes, Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No Do not list Debtor 1 and Yes. Fill out this information for Debtor 2 and the dependent in a separate household of Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents a name. Dependent's relationship to Begendent's relationship to Begendent's relationship to Begendent's relationship to Pyes. Do not state the dependents are separate household of Debtor 2. Do not state the dependents and the properties of the properties of the properties and properties are separate household of Debtor 2. The rental of home ownership expenses for your residence, include first mortgage payments and any rent for the ground or lot. If not include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) The rental or home ownership expenses for your residence, include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. S 0.000 4b. Home maintenance, repair, and upkeep expenses 4c. S 0.000	Debtor 1	Barbara Chi	vers			Che	eck if this is:	
United States Bankruptcy Court for the: _EASTERN DISTRICT OF MICHIGAN							•	
United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN Case number (If known) Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer every question. Parts: Describe Your Household Is this a joint case? No. Go to line 2 Yes. Dest Debtor 2 live in a separate household? No Co to line 2 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No Do not list Debtor 1 and Yes. File out this information for each dependent relationship to Debtor 2. Do not state the dependents names. Dependent's relationship to Debtor 2 Dependent's relat								
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Part ! Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No. Do not list Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No. Do not list Debtor 1 and Pess. Fill out this information for each dependent snames. Port I will be pendent snames. Port I will be pendent snames. No. No. Pess. Debtor 2 must file official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No. Do not list Debtor 1 and Pess. Fill out this information for each dependent snames. Port I will be pendent's relationship to be pendent's relationship to Debtor 1 or Debtor 2. 3. Do your expenses include expenses include expenses include expenses of people other than yourself and your dependents? No. Pess. Provided in the state of the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Vour expenses) (Vour expenses) Your expenses (Property, homeowner's, or renter's insurance 4. \$ 0.00 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4c. Home maintenance, repair, and upkeep expenses 4c. Home maintenance, repair, and upkeep expenses		nkruptcy Court for the	: EASTE	RN DISTRICT OF MICHIG	iAN			
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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Rant != Describe Your Household		orm 106J						
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Rant != Describe Your Household	Schedul	e J: Your	Exper	nses				12/
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Ves. Does Debtor 2 live in a separate household? No	1. Is this a jo	oint case?						
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Pendent's pendent's relationship to Debtor 2. Do not state the dependents names. Pendent's pendent Pendent's penden			in a separ	ate household?				
Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Do not state the dependents names. Do not state the dependents names. Do your expenses include expenses of people other than yourself and your dependents? Estimate your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to represent a supplemental Schedule J, check the box at the top of the form and fill in applicable date. Include expenses as of with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 Homeowner's association or condominium dues	=		st file Offici	al Form 106J-2, <i>Expen</i> ses	for Separate Househ	old of Del	otor 2.	
Debtor 2. Debtor 1 or Debtor 2 age live with you? Do not state the dependents names. Debtor 1 or Debtor 2 age live with you? No No Yes No No Yes No No Yes Yes No Yes Yes No Yes Yes No Yes Yes	2. Do you ha	ave dependents?	■ No					
dependents names. Yes No No Yes No No Yes Yes No Yes Yes Yes No Yes Yes		Debtor 1 and	☐ Yes.				•	
No Yes Ye	Do not sta	ite the						□ No
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to repot expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00	dependen	ts names.					_	
3. Do your expenses include expenses of people other than yourself and your dependents? An our expenses of people other than your dependents? Yes								
3. Do your expenses include expenses of people other than yourself and your dependents? Stimate Your Ongoing Monthly Expenses								
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to represent a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. 4d. Home maintenance, repair, and upkeep expenses 4d. 50.00 4d. Homeowner's association or condominium dues 4d. 50.00								
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expenses of people other than yourself and your dependents?	3. Do your e	expenses include		No				00
Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to represent the supplicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues			han _					
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 1. Homeowner's association or condominium dues 4d. \$ 0.00 1. Only the property of the form and fill in a supplement in a Chapter 13 case to report the property and fill in a supplement in a Chapter 13 case to report and fill in applicable date.	yourself a	ana your aepenae	ents? —	100				
expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 765.90 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00								
the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 25.00 4d. Homeowner's association or condominium dues	expenses as o	of a date after the						
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 765.90 4 a. \$ 0.00 4 b. \$ 0.00 4 c. Homeowner's association or condominium dues	the value of su	uch assistance an					Your exp	enses
payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00 4d. \$ 0.00	(Omeran om	1001.)						
4a.Real estate taxes4a.\$0.004b.Property, homeowner's, or renter's insurance4b.\$0.004c.Home maintenance, repair, and upkeep expenses4c.\$25.004d.Homeowner's association or condominium dues4d.\$0.00					nclude first mortgage	4.	\$	765.90
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 25.00 4d. \$ 0.00	If not incl	uded in line 4:						
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 25.00 4d. \$ 0.00	4a. Rea	al estate taxes				4a.	\$	0.00
4d. Homeowner's association or condominium dues 4d. \$ 0.00	4b. Proj	perty, homeowner'	s, or renter	's insurance		4b.	\$	
		· ·					i ————	
5. Additional mortgage payments for your residence, such as home equity loans 5. \$ 0.00							·	

Fill in th	his inform	ation to identify your	case:				
Debtor '	1	Barbara Chivers					
	_	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if		First Name	Middle Name	Last Name			
		kruptcy Court for the:	EASTERN DISTRICT O	NE MICHIGAN			
Officed C	States Dan	ikruptcy Court for the.	LASTERN DISTRICT O	I WICHIGAN			
Case nu	umber						
(if known)							cif this is an ded filing
Dec	larati	ople are filing together	r, both are equally response to connection with a bank	nsible for supplying cori	rect information. Making a false stat		
Die		Below or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?		
	No No	or agree to pay come		,			
_		ame of person				nkruptcy Petition P n, and Signature (C	
		y of perjury, I declare true and correct.	that I have read the sum	mary and schedules file	d with this declarati	on and	
Х	/s/ Barb	ara Chivers		X			
	Barbara	Chivers e of Debtor 1		Signature of	Debtor 2		
	Date J	une 13, 2019		Date			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in	this information to identify	your case:							
Debto			LastNama						
Debto		Middle Name	Last Name						
(Spouse	if, filing) First Name	Middle Name	Last Name						
United	States Bankruptcy Court for	the: EASTERN DISTRICT O	F MICHIGAN						
Case r	number n)				Check if this is an amended filing				
State Be as d	complete and accurate as p	ial Affairs for Indiving possible. If two married people ded, attach a separate sheet to question.	are filing together, both are	equally responsible for sup					
Part 1	Give Details About You	ur Marital Status and Where Yo	u Lived Before						
1. W	hat is your current marital	status?							
П	l Married								
	Not married								
2. Dı	uring the last 3 years, have	you lived anywhere other than	where you live now?						
	During the last 3 years, have you lived anywhere other than where you live now?								
	No Yes. List all of the places	you lived in the last 3 years. Do r	not include where you live now	<i>i</i> .					
D	Debtor 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there				
		ou ever live with a spouse or le a, California, Idaho, Louisiana, Ne							
		.,,,,,	, , , , , , , , , , , , , , , , , , , ,		,				
	l No l Yes Make sure you fill ou	nt Schedule H: Your Codebtors (C	Official Form 106H)						
	Tes. Make sale you lill oo	it ochedule 11. Tour oodebiors (C	omolari omi roomj.						
Part 2	Explain the Sources of	Your Income							
Fil	II in the total amount of incom	m employment or from operatine you received from all jobs and you have income that you receive	all businesses, including part	time activities.	ndar years?				
	l No								
	Yes. Fill in the details.								
		Debtor 1		Debtor 2					
		Sources of income	Gross income	Sources of income	Gross income				
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)				
	January 1 of current year unter your land to the you filed for bankruptcy		\$13,500.00	☐ Wages, commissions, bonuses, tips					
		Operating a business		☐ Operating a business					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Debtor 1 Barbara Chivers						Case number (if known)						
					Debtor 1				Debto	or 2		
						of income that apply.	(befo	s income re deductions and sions)		ces of inc		Gross income (before deductions and exclusions)
			dar year: December :	31, 2018)	■ Wages bonuses,	s, commissions, tips		\$29,998.00		ages, com ses, tips	missions,	
					☐ Opera	ting a business			□Ор	erating a	business	
			lar year bei December :		■ Wages bonuses,	s, commissions, tips		\$33,016.00		ages, com ses, tips	missions,	
					☐ Opera	ting a business			□Ор	erating a	business	
	winr	nings. Ì each s No	f you are fili	ng a joint cas	se and you l	have income that	you rece	ived together, list i	it only once	under De	ebtor 1.	nd gambling and lottery
					Debtor 1				Debto	or 2		
						of income below.	each (befo	s income from source re deductions and sions)	Source	ces of inc		Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certain Pa	yments You	Made Befo	ore You Filed for	Bankrup	otcy				
6.	Are □	No.	Neither Deindividual puring the No. Yes	position 1 nor Expression 1 nor Expression 290 days before 2 control of the contr	Debtor 2 ha personal, f personal, f pre you filed beach creditoreditor. Do n payments t t on 4/01/22 br both have pre you filed beach creditoreditoreditored beach creditored	amily, or househor for bankruptcy, d or to whom you pa not include paymer o an attorney for to and every 3 year e primarily consult for bankruptcy, d or to whom you pa nomestic support of	umer del bld purpos lid you pa lid a total nts for do this bank rs after th umer del lid you pa	bts. Consumer de se." ay any creditor a to of \$6,825* or moromestic support ob ruptcy case. nat for cases filed obts. ay any creditor a to of \$600 or more a	e in one or or or after total of \$600 and the total	25* or more paysuch as chathe date of or more?	re? rments and nild support a f adjustmen o	
	Cra	aditor'	s Name and	I Address		Dates of payme	ant	Total amount	Amor	ınt you	Was this	payment for
	OI C	Juitor	J Haine and	. Audi 533		Dates of paying	ont.	paid		till owe	1143 11115	paymont for

7.	Within 1 year before you filed for bankrupte <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their votin	erships of which yog g securities; and a	ou are a genera ny managing ag	I partner; corporations gent, including one for						
	■ No											
	Yes. List all payments to an insider.	Dates of navement	Total amount	Amount vou	December for	this payment						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment						
8.	insider?	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an										
	■ No											
	☐ Yes. List all payments to an insider											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include credi	this payment tor's name						
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures										
9.	Within 1 year before you filed for bankruptu List all such matters, including personal injury modifications, and contract disputes.											
	□ No											
	Yes. Fill in the details.											
	Case title Case number	Nature of the case			Status of the	e case						
	Motor City Co-Op Credit Union v. Barbara Chivers 19-1306-GC	Collection 39th District Court 29733 Gratiot Ave Roseville, MI 48066		Ave	P Pending ☐ On appeal							
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	shed, attached	, seized, or levied?						
	No. Go to line 11.											
	☐ Yes. Fill in the information below.											
	Creditor Name and Address	Describe the Property				Value of the property						
		Explain what happened	ı			p. cp. cy						
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		luding a bank or fil	nancial institution	n, set off any a	mounts from your						
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount						
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a No Yes		erty in the possess			fit of creditors, a						

Case number (if known)

Official Form 107

Debtor 1 Barbara Chivers

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Jer	Daibara Cilivers		Case number	(II KIIOWII)			
Par	t 5: List Certain Gifts and Contribution	s					
3.	Within 2 years before you filed for bankro ■ No □ Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$60 per person Person to Whom You Gave the Gift and Address:	0	Describe the gifts	Dates you gave the gifts	Value		
4.	Within 2 years before you filed for bankro ■ No □ Yes. Fill in the details for each gift or co	Vithin 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No					
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	Dates you contributed	Value		
Par	t 6: List Certain Losses						
5.	Nithin 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		Date of your loss	Value of property lost			
Par	t 7: List Certain Payments or Transfers	3					
6.	consulted about seeking bankruptcy or p	orepari	lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services require		rty to anyone you		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	'ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment		
	Josephine Sbrocca 29204 Hoover Road Warren, MI 48093		\$800 + filing fee + counseling fees	6/27/18 to 2/19/19	\$1,200.00		
7.	Within 1 year before you filed for bankrupromised to help you deal with your cred Do not include any payment or transfer that No Yes. Fill in the details.	ditors o		or transfer any prope	rty to anyone who		
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Barbara Chivers Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr		paymen	e any property or ts received or debts exchange	Date transfer was made
19.						
	Name of trust	Description and v	alue of the prope	rty transfe	erred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.					
		ast 4 digits of account number	Type of account instrument	r	Date account was closed, sold, noved, or ransferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe th	e contents	Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?					
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		escribe th	e contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	r Someone Else				
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe th	e property	Value
Par	t 10: Give Details About Environmental Inform	mation				
For	the purpose of Part 10, the following definition	s apply:				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5

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Debtor 1 Barbara Chivers Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ☐ Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ■ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code)

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

Debio	Darbara Cilivers			
vith a	e and correct. I understand that mal bankruptcy case can result in fines .C. §§ 152, 1341, 1519, and 3571.	, J.	property, or obtaining money or property by fraud in or up to 20 years, or both.	onnection
/s/ Ba	arbara Chivers			
Barb	ara Chivers	Signature of Debtor	2	
Signa	ture of Debtor 1	-		
Date	June 13, 2019	Date		
Did yo	u attach additional pages to Your S	tatement of Financial Affairs for Ind	ividuals Filing for Bankruptcy (Official Form 107)?	
No				
☐ Yes				
Did yo	u pay or agree to pay someone who	is not an attorney to help you fill o	ut bankruptcy forms?	
No				

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

United States Bankruptcy Court Eastern District of Michigan

In re	Barbara Chivers		Case No.			
		Debtor(s)	Chapter 7			
		MENT OF ATTORNEY FOR DEBTOR(S RSUANT TO F.R.BANKR.P. 2016(b)	<u>5)</u>			
	The undersigned, pursuant to F.R.Bankr.P. 201	1.6(b), states that:				
1.	The undersigned is the attorney for the Debtor((s) in this case.				
2.	The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]					
	[X] <u>FLAT FEE</u>					
		mplation of and in connection with this case				
	B. Prior to filing this statement, receive	ed	800.00			
	C. The unpaid balance due and payable	e is	. 0.00			
	[] <u>RETAINER</u>					
	A. Amount of retainer received		·			
		ne retainer at an hourly rate of \$ [Or a es and expenses exceeding the amount of the	tach firm hourly rate schedule.] Debtor(s) have retainer.			
3.	\$335.00 of the filing fee has been paid.					
4.	In return for the above-disclosed fee, I have ag that do not apply.]	reed to render legal service for all aspects of	the bankruptcy case, including: [Cross out any			
	bankruptcy; B. Preparation and filing of any petition C. Representation of the debtor at the m D. Representation of the debtor in adver E. Reaffirmations; F. Redemptions; G. Other: Negotiations with secured cred		ich may be required; , and any adjourned hearings thereof;			
5.	522(f)(2)(A) for avoidance of lie By agreement with the debtor(s), the above-dis	ns on household goods. sclosed fee does not include the following se in any dischargeability actions, judici	rvices:			
5.	The source of payments to the undersigned wa AXX _ Debtor(s)' earning:	•	ed			
7.	The undersigned has not shared or agreed to sh corporation, any compensation paid or to be pa		nembers of the undersigned's law firm or			
Dated:	June 13, 2019	Attorney i Josephii Josephii 29204 Ho Warren,	ohine R. Sbrocca for the Debtor(s) ne R. Sbrocca ne R. Sbrocca (P45546) pover Road MI 48093 -4421 jrsbrocca@gmail.com			
Agreed						
	Barbara Chivers Debtor	Debtor				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans.

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

In re	Barbara Chivers		Case No.			
		Debtor(s)	Chapter	7		
	VERIFICATION OF CREDITOR MATRIX					
The abo	ove-named Debtor hereby verifies t	that the attached list of creditors is true and con	rrect to the best	of his/her knowledge.		
Date:	June 13, 2019	/s/ Barbara Chivers				
		Barbara Chivers				

Signature of Debtor

Amcol PO Box 21625 Columbia, SC 29221-1625

Auto Pass/CFNA PO Box 81315 Cleveland, OH 44181-0315

Christian Financial Credit Union 18441 Utica Rd Roseville, MI 48066

Credit Control LLC 5757 Phantom Dr, Ste 330 Hazelwood, MO 63042

Discover PO Box 3008 New Albany, OH 43054-3008

Estate Information Services PO Box 1398 Reynoldsburg, OH 43068-6398

Jennifer Chivers 44620 Bayview Ave, Apt #18106 Clinton Township, MI 48036

Loancare PO Box 8968 Virginia Beach, VA 23450

Motor City Co-Op Credit Union c/o Butler Rowse-Oberle PLLC 24525 Harper Ave Saint Clair Shores, MI 48080

Motor City Co-Op Credit Union 28820 Mound Road Warren, MI 48092

SJP Laboratory 8085 Rivers Ave #100 Charleston, SC 29406-9239 St. John Anesthesiologists PO Box 67000 Detp 227601 Detroit, MI 48267

St. John Macomb Oakland Hospital 11800 E. 12 Mile Rd Warren, MI 48093

St. John Providence PO Box 42008 Phoenix, AZ 85080-2008

St; John Hospital & Medical Center PO Box 773179 3179 Solutions Center Chicago, IL 60677-3001